PATENT APPLICATION FFE DETERMINATION RECORD  Effective mber 29, 1999  Application or Docket Number 09/647513												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER SMALL	
FO	R	NUMB	NUMBER FILED		NUMBER EXTRA			RATE	FEE	1	RATE	FEE
BA	SIC FEE									OR		340
то	TAL CLAIMS	17	minus	20=	•			X\$ 9=		OR	X\$18=	/
IND	EPENDENT CL	AIMS 2	minus	3 =	•			X39=		OR	X78=	/
MULTIPLE DEPENDENT CLAIM PRESENT							_	+130=			+260=	1
* If the difference in column 1 is less than zero, enter "0" in column 2							'	TOTAL		OR OR	TOTAL	1
CLAIMS AS AMENDED - PART II								TOTAL		OH	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus			=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<u> </u>	=	ľ	X39=		OR	X78=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PEN	DENT CLAIM			+130=			+260=	
								TOTAL		OR	TOTAL	
	٠.	(Oaluma 4)		,,	2-k (2)	(Column 3)	,	ADDIT. FEE		OR ,	ADDIT. FEE	
		(Column 1) CLAIMS	1	Γ,	Column 2) HIGHEST		lr		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER		P	NUMBER REVIOUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	<b> </b>	PAID FOR	_ 1	5	/ x81d-1			X\$18=	
	Independent	•	Minus	1		=		MIZ	LABL	OR	V70	
		NTATION OF M	IULTIPLE DE	PEN	DENT CLAIM	1	1	X39=	· iDį	QR		
					-	<u></u>		+130=		OR	+260=	
i								TOTAL ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)		(	Column 2)	(Column 3)	_					
AMENDMENT C	į	CLAIMS REMAINING AFTER AMENDMENT		F	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	•••	•	=		X\$ 9=	•	OR	X\$18=	1
	Independent	•	Minus	1.	**	=		X39=		1	X78=	1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						]	<u> </u>		OR		-
	If the enter in eath	ıma 1 ici lees then	the entry in an	lume	2 write "N" in n	olumn 3		+130=		OR	+260=	ļ
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	ADDIT. FEI	
	The Highest Nur	nber Previously P	aid For (Total	or Ind	lependent) is th	ne highest numb	er fo	ound in the ap	opropriate bo	ox in c	olumn 1.	